9-01-05 WISCONSIN NURSE AIDE TRAINING PROGRAM & REGISTRY MANUAL

Appendix I – NURSE AIDE TRAINING, TESTING AND REGISTRY FORMS

These forms are necessary for the administration of a Wisconsin Nurse Aide training program.

<u>NAME</u>		<u>NUMBER</u>
•	Application for the Approval of a Training Course for Primary Instructors	*DOH-2216
•	Notice of Substantial Change	DSL-2224
•	Nurse Aide Instruction Program Application	*DSL-2220
•	Nurse Aide Training Program Primary Instructor Application	DSL-2610
•	Caregiver Program Brochure	PDE-3141

^{*}NOTE: These forms may be obtained by contacting the Office of Caregiver Quality at: Caregiver_Intake@dhfs.state.wi.us or (608) 243-2083.

The following Wisconsin Nurse Aide Registry forms may be accessed through the Promissor website at **www.promissor.com**. Select "Registry" and then scroll to "Wisconsin Nurse Aides."

NAME

- Wisconsin Nurse Aide Candidate Handbook
- Application for Competency Evaluation
- Registry Out-of-State Application
- Change/Correction Form
- Registry Renewal Form
- NNAAP Testing Schedule (Regional Test Sites/Test Site Codes
- Practice Exam (written)
- Nurse Aide Registries (by state)
- American Red Cross Grievance Process
- American Red Cross Grievance Form